SUBMIT: <u>COMPLETED</u> APPLICATION, TAX Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFISLD GOUNTY, MISCENSIN
Date Man (Received) JUL 0.1 2016

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Sanitury

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100 Sept. 100 Se

Date: Permit #: Refund: Amount Paid: 10-4-16 \$135 9-39-16 16-0344

INSTRUCTIONS. No permits will be issued until all fees are paid. Checks are made payable to: Rayfield Court. 7-----

Bayfield Co. Zoning Dept.

	××			Vinger and the state of the sta	est and party and	Conditional Use: (explain) Other: (explain)	Conditional Use Other: (explain)		
		_	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			Special Use: (explain)	Special U		
T A A A A A A A A A A A A A A A A A A A		-		/)	viceration (specify	Accessory Building Addition/Aireration (Specify	Accessor		-
	×		And the second s			Accessory Building (specify)	Accessor	<del></del>	
	× >					-	Addition,	1	Municipal lice
			Addition and the state of the s		te)	Mobile Home (manufactured date)	Mobile H		
			cooking & food prep facilities)		☐ sleeping quarters, <u>or</u>	Bunkhouse w/ (□ sanitary, or □	Bunkhou		
Contract of the Contract of th					age	with Attached Garage		Use	Commercial Use
	×					with (2 <sup>nd</sup> ) Deck			
	×					with a Deck			
	×					with (2 <sup>nd</sup> ) Porch			j
	×					with a Porch		Se	Residential Use
	×					with Loft		1	
352	×22)	1/6			hack, etc.)	Principal Structure (first structure on property) Residence (i.e. cabin, hunting shack, etc.)	Principal :	X)	
Footage	Dimensions	Dime		F	Proposed Structure	-		<u> </u>	Proposed Use
Sollare	gira		white.		rengtii:			ction:	Proposed Construction:
	Height:		Width:		Length:	r is relevant to it)	ng applied to	(if permit bei	Existing Structure: (If permit being applied for is relevant to it)
			☐ Compost Toilet			Foundation		Property	
or Straction	ct)	vice contrac	!	None		□ No Basement	ness on	Run a Business on	T
	Vaulted (min 200 gallon)	<b>∀</b> Vaulted	Privy (Pit) or		111100	Basement	xisting bldg)	Relocate (existing bldg)	0,000,7
   ∐  	ype:	s) Specify T					2 200	* Conversion	<u> </u>
k Well	/pe:	Specify Type:	- 1			1-Story + Loft	Heration	New Construction	
□ City			☐ Municipal/City	<b>≯</b> 1	Seasonal	* 1-Story	2		material
Water	pe of ry System operty?		What Ty Sewer/Sanita Is on the pr	# of bedroams	Use	# of Stories and/or basement		Project	Value at Time of Completion * include donated time &
				-					Non-Shoreland
Yes	Yes	7	is from Shorelin	Distance Structure	Pond or Flowage If yescontinue	Lake,	/Land within	☐ Is Property	☐ Shoreland —▶
Are Wetlands Present?	ls Property in Floodplain Zone?	-	is from Shorelin	Distance Structure	itream (ind. Intermittent)	liver, S	/Land within Iward side of	☐ Is Property/Land within 300 feet of F Creek or Landward side of Floodplain?	
						THE PARTY AND ADDRESS OF THE PARTY AND ADDRESS			
• •	Acreage :915	Lot Size	Lot	Paraes	Town of:	N, Range CQ W	45 N	, Township	Section <b>07</b>
add to	288	Patawatomi	Biock(s) NO.	For(s) No.	1154-178	Lot(s)	Gov't Lot	m 1/4	5W 1/4, 5
Page(s) 1/3	Page(:	Volume 11 S 4	22000	75.00.4.5	2.	tatement)	4	Legal Description:	LOCATION
rty Ownership)	ιent: (i.e	Recorded Docu			digits)	PIN: (23			Paroga Taroga
Attached  Yes No	Attached 1 Yes	/zibj:	Agent Mailing Address (include city/state/zlp):	gent Wailing Ado		of Owner(s)) Agent Phone:	ation on behalf o	(Person Signing Application on behalf of Owner(s))	Authorized Agent: (Per
the state of the s		77: 1				Contract		の で て へ	Contractor:
hone:	Plumber Phone:		73	5487	3		agle dr	White Eagle	, ×.
3-6156	715-373-6156	54891	Washburn WI &	3	117 E 5th St.	Valing 12		\$ \$	Owner's Name:
	☐ B.O.A. ☐ OTHER		☐ CONDITIONAL USE ☐ SPECIAL USE	CONDITIONAL	W	SANI	K LAND USE	)UESTED▶	TYPE OF PERMIT REQUESTED→
						hecks are made payable to: Bayfield County Zoning Department.  NO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.	ry Zoning Depa PERMITS HAVE	o: Bayfield Coun FION UNTIL ALL	hecks are made payable to: Bayfield County Zoning Department. 30 NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN !

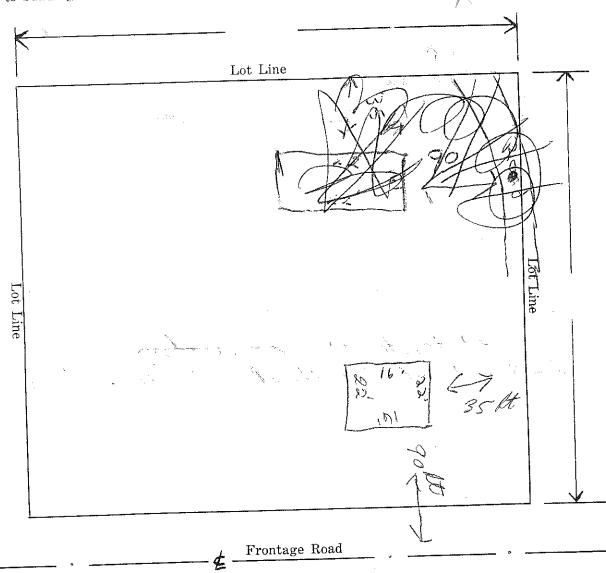
FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES and lot the best of my (our) knowledge and belief it is true, correct am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue may be a result of Bayfield County relying on this information I (we) am (are) providing in 91 with this application. I (we) consent to county officials charged with adminst above described property at any reasonable time for the purpose of inspection. Owner(s): Authorized Agent: (If there are Multiple Itiple Owners listed on the Deed All Owners must sign or letter(s) of authorization of the Deed All Owners must sign or letter(s) of authorization of the Owners listed on the Deed All Owners must sign or letter(s) of authorization of the Owners listed on the Deed All Owners must sign or letter(s) of authorization of the Owners listed on the Deed All Owners must sign or letter(s) of authorization of the Owners listed on the Deed All Owners must sign or letter(s) of authorization of the Owners listed on the Deed All Owners must sign or letter(s) of authorization of the Owners listed on the Deed All Owners must sign or letter(s) of authorization of the Owners listed on the Deed All Owners must sign or letter(s) of authorization of the Owners listed on the Deed All Owners must sign or letter(s) of authorization of the Owners listed on the Ow (If you are signing on behalf of the owner(s) a letter of authorization must acco CALAKA mpany this lest Date Date 200 22 2016 0/

and complete. I (we) acknowledge that I (we) permit. I (we) further accept liability which mg county ordinances to have access to the

Address to send permit

Hold For Sanitary:	Signature of Inspector:	О	Date of Inspection:	Was Proposed Bu	Is Structu	Is Parcel in	Permit #:		other previously Prior to the plac one previously s marked by a lice	Setback to Setback to Setback to	Setback fro Setback fro Setback fro	Setback fro		Please c			Distriction of the second
itary:	Inspector:	7	ection: 7	Was Pa ed Buik cord:	ture Non-Conform Variance (B.O.A.)	IG-0344  Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership	Information led (Date):	(9) Stake	isly surveyed corner of lacement or construct by surveyed corner to the licensed surveyor at the	Septic Tank o Drain Field Privy (Portable) Privy (Portable)	Setback from the West Lot Line Setback from the East Lot Line Setback from the East Lot Line	from the Center	(8) Setbar	omplete (1)			(1) Show   (2) Show   (3) Show   (4) Show: (5) Show: (6) Show: (7) Show
Hold	1	03	Take or Board C	egally Created ite Delineated	ÿ(	ard Lot □ Yes ership □ Yes	Issuance Information (County Use Only) Permit Denied (Date): Permit #	or Mark Prop NOTICE: All e Construction	rmarked by a licens on of a structure make of a structure make other previously e owner's expense.	Setback to Septic Tank or Holding Tank Setback to Drain Field Setback to Privy (Portable, Composting) Pror to the placement or construction of a structure with	Lot Line of Line of Line	Centerline of Platted Road Established Right-of-Way	etbacks: (measure	- (7) above (r	$\sim$		Show Location of: Show / Indicate: Show Location of (*): Show: Show: Show: Show any (*): Show any (*):
Hold For TBA:		2500	Tab 16 Ins Autrocy Committee or Board Conditions Attached?	Xyes □ No		S (Deed of Record) S (Fused/Contiguous Lot(s))	se Only)	osed Location Land Use Permof New One &	corner or marked by a licensed surveyor at the owne construction of a structure more than ten (10) feet buoner to the other previously surveyed corner, or veneyor at the owner's expense.	k g) ithin ten (10) feet o		d Road -Way	Setbacks: (measured to the closest point)  Description Meas	complete (1) (7) above (prior to continuing)			
<b>I</b>			Inspected by:	- X	17	rd) (uous Lot(s))	Reason for Denial:	ints Expire One (1) Yea Two Family Dwelling Own, Village, City, Sta	owner's expense. eet but less than thir or verifiable by the D	62	7050	10	est point)  Measurement	ing)			Proposed Construction North (N) on Plot Plan (*) Driveway <u>and</u> (*) Frontage Road ( All Existing Structures on your Propel (*) Well (W); (*) Septic Tank (ST); (*) (*) Lake; (*) River; (*) Stream/Creek; (*) Wetlands; or (*) Slopes over 20%
Hold For Affidavit:			S PO S			\$ 0°		200 (1) Year from to welling: ALL Melling: ALL Melling: Fee State or F	ty (30) feet from th	Feet Feet Feet	Feet Feet	Feet Feet	ment		te		lan Frontage Road Frontage Road Frontage Road Frontage Road Front (ST): (' Stream/Cree Slopes over 20
		Count	Tif No they need to be	Were Proper	Previously Gran	-		Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.  For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code The local Town, Village, City, State or Federal agencies may also require permits.	other previously surveyed corner or marked by a licensed surveyor at the owner's expense. Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setbach one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the promarked by a licensed surveyor at the owner's expense.	Setback to Well	Setback from 20% Slope / Elevation of	Setback from Setback from Setback from			To the state of th		Proposed Construction  North (N) on Plot Plan  (*) Driveway and (*) Frontage Road (Name Frontage Road)  All Existing Structures on your Property  (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond  (*) Wetlands; or (*) Slopes over 20%
Hold For Fees:		4 00	attached.)	Were Property Lines Represented by Owner Was Property Surveyed	<	uired □ Yes	T COCC	). Drain field (DE), Hoance if Construction of Required To Enforce may also require permany a	setback, the bound	Setback to Well	Setback from Wetland 20% Slope Area on property Elevation of Floodplain	Setback from the Lake (ordinary high-water mark) Setback from the River, Stream, Creek Setback from the Bank or Bluff	Desc	Changes in		1	age Road) [DF); (*) Holdi
ees;		C 70.3	À 3	ented by Owne operty Surveye		<b>7</b>	Colla	DF), Holding T ction or Use ha inforce The Un repermits.	ary line from which the ner within 500 feet of th	the measured mus	erty	dinary high-w tream, Creek Bluff	Description	Changes in plans must be approved	7		ng Fank (HT) a
	Date c	.03.cm		u Uyes _	case #: ()	Affidavit Required	Jailial y Date.	ank (HT), Prive s not begun. If form Dwelling	ick must			ater mark)					nd/or (*)
	Date of Approval:	10 to 20 to	tion		(2000)	quired     Yes		II). Privy (P), and Well (W).  egun.  welling Code.	ack must be measured must be visible from oposed site of the structure, or must be	5	Yes		Measu	nd by the Planning & Jonning Don;			<b>y</b> (P)
Management	10-3-2016	०द्भहर	- 12	- Two		Z KNO		<u>[(w).</u>	e visible from	Feet	Feet	Feet Feet	Measurement				

- 1. Using the frontage road as a guideline, fill in the lot dimensions and indicate North (
- 2. Show the approximate location and size of the building.
- 3. Show the location of the well, septic tank, and drain field.
- 4. Show the location of any lake, river or stream if applicable.
- 5. Show dimensions in feet on the following:
  - a. building to all lot lines
  - b. building to centerline of road
  - c. building to lake, river, or stream
  - d. septic tank to closest lot line
  - e. septic tank to building
  - f. septic tank to well
  - g. septic tank to lake, river, or stream
  - h. drain field to closest lot line
  - i. drain field to building
  - j. drain field to well
  - k. drain field to lake, river, or stream
  - l. well to building



Indicate whether or not the following locations are staked:

 Structure . . . Yes \_\_\_\_\_\_ No \_\_\_\_\_
 No \_\_\_\_\_\_ Well . . . . Yes \_\_\_\_\_\_ No \_\_\_\_\_

 Septic Tank . . . Yes \_\_\_\_\_\_ No \_\_\_\_\_
 No \_\_\_\_\_\_\_